



- 3500 total employees in all locations
- Over 711,00 patients are seen at our main Billings location each year
- Over 144,000 patients are seen at our branch clinics
- 13,000 patients served in specialty outreach clinics
- Over 3,300 patients served via the Eastern Montana Telemedicine Network (EMTN)
- Billings Clinic is changing how we deliver care and is focused on designing work flows for staff to control and sustain cost improvement that matters

- Health care is the third largest industry in Montana, as measured by GSP, and has experienced job growth even during the recession.
- Health care is a labor intensive industry. In fiscal year 2010 (July 09 – Jun 10), Billings Clinic paid over \$263 million in salary and benefits. This constitutes 53% of our total annual expense.
- Cost of charity care provided at Billings Clinic has averaged close to \$14 million annually during the past five years.
- Billings Clinic is committed to using local and state suppliers, contractors and subcontractors where appropriate and feasible. Over \$19 million dollars will be spent this year alone on medical supplies and equipment. In addition, \$74.2 million has been spent on construction and associated furnishings and equipment at Billings Clinic in the last three years.
- Billings Clinic and all health care organizations have a significant dependence on State and Federal Government sources in programs such as Medicare, Medicaid, Indian Health Services, & Workers' Compensation.
 - It is important that public programs have reimbursement levels that cover the cost of care so the private insurance market and business doesn't experience cost shifting.
- We urge your support during the session and we place an emphasis in the following areas:
 - Medicaid reimbursement that approximates the cost of providing care
 - Provider rates – no further cuts beyond Governor's budget
 - Maintain Hospital Utilization Fee (Bed Tax) for intended purposes
 - Workers Compensation legislation that reduces premiums and preserves access to medical services
 - Restore Community Crisis funding to 2009 HB 130 levels
 - Continued investment in workforce training
 - Montana Family Medicine Residency
 - Support WWAMI funding
 - Maintain current funding levels for Worker Training Grant Program